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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

N/A

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY OH	SHEETS DRAWING 4	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
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## TITLE

Dual microphone assembly for mask

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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